PTO/SB/01 (6–95) (modified)
Approved for use through 10/31/96 OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| 0010/PTO<br>Rev. 6/95  | U.S. Department<br>Patent and Trad   |  | Attorney Docket  | Number                     | 20911-0732                                       | 22   |  |  |  |  |  |
|--|--|--|--|----------------------------|--|--|--|--|--|--|--|
|  |  |  | First Named Inve   | entor                      | Masakazu Kawai                                   |  |  |  |  |  |  |
| COMBINED DECI  |  | `  |  | C                          | OMPLETE IF KN                                    | OWN  |  |  |  |  |  |
| 1.63) AND POWE   | R OF AT  | TORNEY   |  |                            |  |  |  |  |  |  |  |
| FOR UTILIT PATENT AI   |  |  | Application Num  | iber                       | not yet known                                    |  |  |  |  |  |  |
|  |  |  | Filing Date  |                            | August   | 15, 2003   |  |  |  |  |  |
|  |  |  | Group Art Unit   |                            | not yet kno                                      | own  |  |  |  |  |  |
| X   Declaration O Submitted with Initial Filing  | S  | eclaration<br>ubmitted after<br>nitial Filing                    | Examiner Name  |                            | not yet kno                                      | own  |  |  |  |  |  |
| My residence, mailing address, a I believe I am the original, first a plural names are listed below) of Method and Pr the specification of which [X] is attached hereto OR  [] was filed on (MM/DD/YY Application Number [ | As a below named inventor, I hereby declare that:  My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Method and Process for Obtaining Moments and Torques in a Biped Walking System  the specification of which  (Title of the Invention)  [X] is attached hereto |  |  |                            |  |  |  |  |  |  |  |
| I acknowledge the duty to disclo Regulations. § 1.56.  | -  |  | patentability as de  | fined in Tit               | le 37 Code of Fed                                | eral   |  |  |  |  |  |
| I hereby claim foreign priority b<br>for patent or inventor's certifica<br>States of America, listed below<br>of any PCT international applic  | te, or § 365 (a)<br>and have also i  | of any PCT internated dentified below, by filing date before the | tional application w<br>checking the box, a<br>at of the application | hich desigr<br>iny foreign | nated at least one of application for pa         | country other than the United<br>Itent or inventor's certificate, or<br>I. |  |  |  |  |  |
| Prior Foreign Application Country  |  | *  | eign Filing Date   | Priority                   |  | Certified Copy Attached?   |  |  |  |  |  |
| Number(s)  |  | (MI  | /DD/YYYY) Not Claime  [  |                            | Claimed  | YES NO   |  |  |  |  |  |
| Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:  |  |  |  |                            |  |  |  |  |  |  |  |
| I horoby claim the hence   | or Title 25 11   | sited States Code 6  | 110(a) of 11   | tad State                  | maniologal as al                                 | ination(a) listed below  |  |  |  |  |  |
| Application Number   | e (MM/DD/YYYY)   |  | provisional application(s) listed below.                             |                            |  |  |  |  |  |  |  |
| 60/413,024   | (3)  |  | 9/23/2002  | 1                          | Additional provisional   application numbers are |  |  |  |  |  |  |
| 60/421,964   |  | 10/28/2002   |  |                            | application numbers are listed on a supplemental |  |  |  |  |  |  |
| 00. 121,504  | sheet attached hereto.   |  |  |                            |  |  |  |  |  |  |  |

| DEC  | ADATION  |   |   | T   | _                               |  |                                    | Pan                             | e 2                                |                      |                                 |                |
|--|--|---|---|---|---------------------------------|--|------------------------------------|---------------------------------|------------------------------------|----------------------|---------------------------------|----------------|
| DECLARATION  I hereby claim the benefit under Title 35, United States Code § 120   |  |   |   |   | Page 2                          |  |                                    |                                 |                                    |                      |                                 |                |
| international application desig<br>claims of this application is no<br>the first paragraph of Title 35,<br>patentability as defined in Title | nating the United<br>t disclosed in the<br>United States Co<br>e 37, Code of Fed | l States of An<br>prior United<br>ode § 112, I a<br>deral Regulat | merica, l<br>d States<br>cknowle<br>tions § 1 | listed bel<br>or PCT i<br>edge the<br>.56 whic                | low a<br>nterr<br>duty<br>ch be | and, inso<br>national<br>to disc<br>came a | ofar as t<br>l applica<br>lose inf | the sub<br>ation in<br>ormation | ject matte<br>the manr<br>on which | r of<br>er p<br>is m | each of<br>rovided<br>aterial t | the<br>by<br>o |
| prior application and the natio<br>U.S. Parent Application   | nal or PCT intern  |   |   | of this application.  Parent Filing Date Parent Patent Number |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| Number   | Numl   |   |   | (MM/DI  |                                 |  |                                    | (if applicable)                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 | <del></del>                        |                      |                                 |                |
| Additional U.S. or PCT is  | l<br>nternational appli  | cation numb   | ers are l                                     | isted on  | a sur                           | oplemer                                    | ntal prio                          | rity sh                         | eet attach                         | ed h                 | ereto.                          |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 | all            |
| As a named inventor, I hereby business in the Patent and Trac  |  |   |   | l/or agen   | t(s) t                          | o prose                                    | cute thi                           | s appii                         | cation and                         | l to t               | ransact                         | all            |
|  |  |   | ion   |   | Name                            |  |                                    |                                 |                                    | Registration         |                                 |                |
|  | Number   |   |   |   |                                 |  |                                    |                                 |                                    |                      | ber                             |                |
| Albert C. Smith 20,35  |  |   | )   |   |                                 | Jetti                                      | rey Bril                           | ı                               |                                    |                      | 51,1                            | 98             |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    | ĺ                    |                                 |                |
|  |  |   |   |   |                                 |  | •                                  |                                 |                                    |                      |                                 |                |
|  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| Additional attorney(s) an  | d/or agent(s) nan  | ned on a sup  | plement                                       | al sheet a  | attac                           | hed her                                    | eto.                               |                                 |                                    |                      |                                 |                |
| Please direct all correspondence to  |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   | bert C.                                       | Smith<br>Vest LLI   | D                               |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   | y Center  |                                 |  |                                    |                                 |                                    |                      |                                 |                |
|  |  |   |   | ia Street   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| ·  |  | Mounta  | in View<br>U.S.A                              | , CA 940  | 041                             |  |                                    |                                 |                                    |                      |                                 |                |
| Telephone (650) 335-729  | 5  |   | U.S.A   |   | ax                              | (650                                       | 938-52                             | 200                             |                                    |                      |                                 |                |
| I hereby declare that all stateme  | nts made herein of   | f my own kno  | wledge (                                      | are true a  | nd th                           | at all et                                  | atoments                           | made                            | on inform                          | tion                 | and be                          | lief           |
| are believed to be true; and furth   |  |   |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| are punishable by fine or impris   |  |   |   |   |                                 |  | l States (                         | Code ar                         | nd that suc                        | h wi                 | llful fals                      | se             |
| statements may jeopardize the v Name of Sole or First I  |  | ication or any  |   |   |                                 |  | unsign                             | ed inve                         | entor                              |                      | ·····                           |                |
| Given  |  | Middle  |   | amily   |                                 |  | , anoign                           |                                 |                                    | S                    | uffix                           |                |
| Name MASAKAZU Initia   |  |   |   | Name KAWA   |                                 | WAI  | /AI                                |                                 |                                    |                      |                                 |                |
| Inventor's<br>Signature  |  |   |   |   |                                 |  | Date                               |                                 |                                    |                      |                                 | ·              |
| Residence: City Saitama  |  | State   |   | Country   |                                 |  | / Japan                            |                                 |                                    | Citizenship          |                                 |                |
| Mailing Address K.K. H   | onda Gijutsu Ke  | enkyusho  |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| Mailing Address 4-1, Ch  | uo 1-chome, Wa   | ko-shi .  |   |   |                                 |  |                                    |                                 |                                    |                      |                                 |                |
| City Saitama   |  | State   |   | Zip   |                                 |  | (                                  | Countr                          | y Japa                             | n                    |                                 |                |
| [X] Additional inventors are   | being named on   | supplementa   | l sheet(s                                     | s) attache  | d he                            | reto                                       |                                    |                                 |                                    |                      |                                 |                |

|  | ı |  |
|--|---|--|
|  | - |  |
|  | 1 |  |

| DECLARATION   |                |                     |    | ADDITIONAL INVENTOR(S) Supplemental Sheet            |          |                 |        |                     |                  |              |  |
|---|----------------|---------------------|----|--|----------|-----------------|--------|---------------------|------------------|--------------|--|
| Name of Additional Joint Invento  |                |                     |    | A petition has been filed for this unsigned inventor |          |                 |        |                     |                  |              |  |
| Given<br>Name YASUSHI   | Mide<br>Initia | 1                   |    | Family<br>Name                                       | KEUCH    | EUCHI           |        | Sı                  |                  | uffix        |  |
| Inventor's<br>Signature   |                |                     |    |  |          | Date            |        |                     |                  |              |  |
| Residence: City Saitama   |                | State               |    | Country  | Japa     | Japan           |        | Citizenship         |                  |              |  |
| Mailing Address K.K. Honda Gijutsu  |                |                     |    |  |          |                 |        |                     |                  |              |  |
| Mailing Address 4-1, Chuo 1-chome, Wako-shi   |                |                     |    |  |          |                 |        |                     |                  |              |  |
| City Saitama  |                | State               |    | Zip  |          |                 | Counti | ry <b>J</b> a       | apan             |              |  |
| Name of Additional Joint Invento  | r, if a        | ny:                 | [] | A petition   | has been | filed for       | this u | unsigne             | d inven          | tor          |  |
| Given<br>Name BEHZAD  | Mide           | dle                 |    | amily<br>Name  | DARIUS   | Н               |        |                     | S                | uffix        |  |
| Inventor's Signature  | <u> </u>       |                     |    | -  |          | Date            |        |                     |                  |              |  |
| Residence: City Sunnyvale   |                | State               | CA | Country  | 9408     | 7               |        | Citizen             | nship            | US           |  |
| Mailing Address 466 Ives Terrace  |                |                     |    | •  | <b>-</b> |                 |        |                     |                  |              |  |
| Mailing Address   |                |                     |    |  |          |                 |        |                     |                  |              |  |
| City Sunnyvale  |                | State CA            |    | Zip 9  | 94087    |                 | Counti | ntry U.S.A.         |                  |              |  |
| Name of Additional Joint Inventor, if any:     A petition has been filed for this unsigned inventor   |                |                     |    |  |          |                 |        |                     |                  |              |  |
| Name of Additional Joint Invento  | r, if a        | ny:                 | [] | A petition   | has been | filed for       | this u | unsigne             | d inven          | tor          |  |
| Name of Additional Joint Invento  | or, if a       | dle                 | F  | A petition<br>Family                                 | has been | filed for       | this u | unsigned            |                  | tor<br>uffix |  |
| Given   | Mid            | dle                 | F  | amily  | has been | filed for       | this u | unsigned            |                  |              |  |
| Given Name Inventor's   | Mid            | dle                 | F  | amily  |          |                 | this u | unsigned<br>Citizen | S                |              |  |
| Given Name Inventor's Signature   | Mid            | die<br>al           | F  | Samily<br>Name                                       |          |                 | this u |                     | S                |              |  |
| Given Name Inventor's Signature Residence: City   | Mid            | die<br>al           | F  | Samily<br>Name                                       |          |                 | this   |                     | S                |              |  |
| Given Name Inventor's Signature Residence: City Mailing Address   | Mid            | die<br>al           | F  | Samily<br>Name                                       |          | Date            | Counti | Citizen             | S                |              |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  | Midd<br>Initia | State  State        | F  | Family<br>Name                                       |          | Date            | Countr | Citizen             | s                | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address   | Middlnitis     | State  State        | F  | Country  Zip  A petition Camily                      |          | Date            | Countr | Citizen             | nship<br>d inven | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  Name of Additional Joint Inventor   | Midd Initia    | State  State        | F  | Country  Zip  A petition                             |          | Date            | Countr | Citizen             | nship<br>d inven | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  Name of Additional Joint Inventor Given Name Inventor's   | Middlnitis     | State  State        | F  | Country  Zip  A petition Camily                      | has been | Date (          | Countr | Citizen             | d inven          | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  Name of Additional Joint Inventor Given Name Inventor's Signature                                 | Middlnitis     | State  State  State | F  | Country  Zip  A petition  Camily  Name               | has been | Date (          | Countr | Citizen             | d inven          | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  Name of Additional Joint Inventor Given Name Inventor's Signature Residence: City                 | Middlnitis     | State  State  State | F  | Country  Zip  A petition  Camily  Name               | has been | Date (          | Countr | Citizen             | d inven          | uffix        |  |
| Given Name Inventor's Signature Residence: City Mailing Address Mailing Address City  Name of Additional Joint Inventor Given Name Inventor's Signature Residence: City Mailing Address | Middlnitis     | State  State  State | F  | Country  Zip  A petition  Camily  Name               | has been | Date (filed for | Countr | Citizen             | d inven          | uffix        |  |